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Bib Data Sheet

CONFIRMATION NO. 7057

SERIAL NUMBER 09/974,736	FILING DATE 10/09/2001  RULE	CLASS 005	GROUP ART UNIT 3673	ATTORNEY DOCKET NO. 082863-000100
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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*

none R.S.

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

ISRAEL 138,968 10/12/2000

O.K. R.S.

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

\*\* 11/14/2001

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged Examiner's Signature: <i>[Signature]</i> Initials: <i>RC</i>	ISRAEL	7	10	1

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## TITLE

Articulated bed frame

FILING FEE  RECEIVED 450	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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